ATTORNEY DOCKET NUMBER COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY PV-1030 (Includes Reference to PCT International Applications) As a below named inventor, I (we) hereby declare that: My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: LENS SYSTEM AND METHOD FOR POWER ADJUSTMENT USING EXTERNALLY ACTUATED MICROPUMPS the specification of which (check only one item below): is attached hereto. was filed as United States application Serial No. and was amended on ______(if applicable) was filed as PCT international application and was amended under PCT Article 19 ____ (if applicable) I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to I acknowledge the duty to disclose information that is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56. I hereby claim foreign priority benefits under Title 35, United States Code, §119 or §356 of any foreign application(s) for patent or inventor's certificate or of any PCT international application(s) designating at least one country other than the United States of America, listed below and have also identified below any foreign application(s) for patent or inventor's certificate or any PCT international application(s) designating at least one country other than the United States of America filed by me on the same subject matter having a filing date before that of the application(s) of which priority is claimed: COUNTRY APPLICATION NUMBER DATE OF FILING PRIORITY CLAIMED (if PCT, indicate "PCT") **UNDER 35 USC 119** (day, month, year) ☐ YES □ NO ☐ YES ☐ NO ☐ YES □ NO ☐ YES □ NO ☐ YES ☐ NO ☐ YES □ NO

Combined Declaration For Patent Application and Power of Attorney (Continued) (Includes Reference to PCT International Applications) ATTORNEY DOCKET NUMBER

PV-1030

I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s) or PCT international application(s) designating the United States of America that is/are listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in that/those prior application(s) in the manner provided by the first paragraph of Title 35, United States Code §112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application(s) and the national or PCT international filing date of this application:

PRIOR U.S. APPLICATIONS OR PCT INTERNATIONAL APPLICATIONS DESIGNATING THE U.S. FOR BENEFIT UNDER 35 U.S.C. 120:

	STATUS (Check one)				
U.S. APPLICATION NUMBER	U.S. FILING DATE		PATENTED	PENDING	ABANDONED
60/433,049	December 12, 2002			х	
10/717,832	November 19, 2003		х		
РСТ	APPLICATIONS DESIGNATING	G THE U.S.	,		
PCT APPLICATION NO.	PCT FILING DATE	U.S. SERIAL NUMBERS ASSIGNED (if any)			
		- 32	3.5		

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith: NICOLA A. PISANO, Reg. No. 34,408, MITCHELL P. BROOK, Reg. No. 32,967, PETER K. HAHN, Reg. No. 34,833; DAVID E. HEISEY, Reg. No. 42,651 and PETER R. MARTINEZ, Reg. No. 42,845, all attorneys with the firm of LUCE, FORWARD, HAMILTON & SCRIPPS, which has an office address at 11978 El Camino Real, Suite 200, San Diego, CA 92130.

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2 0 1	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
		ESCH	VICTOR			
	RESIDENCE & CITIZENSHIP	СПУ	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
		ALBUQUERQUE	NEW MEXICO	US		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY		
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2 0 2	FULL NAME OF INVENTOR	FAMILY NAME	FIRST GIVEN NAME	SECOND GIVEN NAME		
	RESIDENCE & CITIZENSHIP	CITY	STATE OR FOREIGN COUNTRY	COUNTRY OF CITIZENSHIP		
	POST OFFICE ADDRESS	POST OFFICE ADDRESS	CITY	STATE & ZIP CODE/COUNTRY		
Additional inventors are being named on the supplemental Additional Inventor(s) sheets(s) attached hereto.						

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I hereby declare that all statements made herein of my own knowledge are true	and that all statements made on information and belief are believed to be true; and
further that these statements were made with the knowledge that willful false state	ements and the like so made are punishable by fine or imprisonment, or both, under
section 1001 of Title 18 of the United States Code, and that such willful false state	ments may jeopardize the validity of the application or any patent issuing thereon.
SIGNATURE OF INVENTOR 201	SIGNATURE OF INVENTOR 202
DATE	DATE